

<i>Index of Claims</i>	Application/Control No.	10589315 Reexamination
	Examiner	Art Unit

✓	Rejected	-	Cancelled	N	Non-Elected	A	Appeal
=	Allowed	÷	Restricted	I	Interference	O	Objected

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant		<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47			
CLAIM		DATE							
Final	Original								